LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

수요용 Lobbyist's Registration Number

Instructions

Print in ink or type.

 Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Roage LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.

1. NAME LOCKY L. MUCRAY

 This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations. FOR OFFICE USE ONLY
Postmark Date: 02|12|54
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| 2. BUSINESS PHONE 2325- | 3-KI- 1195 | | |
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7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the elicat or someone else pays you to lobby; and (e) the date of termination if applicable.

| ı. | Name Courson Nickel | |
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Terminated Representation as of _____

SUPPLEMENTAL REGISTRATION FORM

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| 2 | Name MENA Arrecica Chak |
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| | Address P.O. Box 809001, Dallas, Ty. 10080 - 9061, Mail Stay 40121 |
| | Business or purpose Creait cart issuer and financial services company |
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| | If No, who pays you? |
| | ☐ Terminated Representation as of |
| 3. | Name |
| | Address |
| | Business or purpose |
| | New Representation Does this person pay you? |
| | If No, who pays you? |
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CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Significant of Lobbyist

Form 601. Rev. 10/2002